ANNUAL REPORT
1989–90

ALBERTA HEALTH AND SOCIAL SERVICES
DISCIPLINES COMMITTEE

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Alberta Health and Social Services
Disciplines Committee

Alberta Health & Social Services Disciplines Committee
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I. Introduction

This is the thirteenth Annual Report of the Alberta Health and Social Services Disciplines Committee. The report describes the Committee's history, mandate, and structure, and gives an account of its activities during the period of April 1, 1989 to March 31, 1990.

A. History of the Committee

The Alberta Health Manpower Committee was established in 1973 for the purpose of coordinating workforce planning activities in the health care sector. It was chaired by the Deputy Minister of Health and Social Development. The membership consisted of senior officials from that department as well as the Departments of Labour and Manpower; Advanced Education; and the Alberta Hospitals Services Commission.

In 1975, government departments were reorganized and a new inter-departmental coordinating body was formed: the Alberta Health and Social Services Disciplines Committee. The Committee consisted of senior officials from three departments: Social Services and Community Health; Advanced Education and Manpower; and Hospitals and Medical Care. The Committee's mandate was formally set out by Ministerial Order in August 1976 and its responsibilities were expanded to include workforce planning in social services. The Chairman, from outside government, was appointed to act as a facilitator and a public representative.

Since 1976, the Committee's makeup has been adjusted to governmental reorganizations but its mandate has remained unchanged.

B. Mandate of the Committee

To meet the service requirements of Alberta's health care and social service programs, it is essential to have an adequate supply of appropriately trained personnel. The supply, demand, and distribution of the workforce must be carefully monitored in an effort to avoid a shortage or surplus in the needed disciplines. Research and planning must be undertaken so that supply and demand will be in close balance. This work is complex and related to many factors: services, training programs, legislation, immigration etc. The responsibility for this task does not clearly fall within a single department but crosses many boundaries. It is the mandate of the Alberta Health and Social Services Disciplines Committee to act as a coordinating body for government and to undertake research in this area. In 1989, ministers of participating departments met to review the mandate of the Committee. At that time, it was recognized that interest groups such as those representing the professions and employers were taking a more active role in workforce planning. To support this work, it was decided that the Committee's responsibility in the area of research will focus on collection and publication of data and coordination of research activities. The Committee encourages government departments, professional associations, employers, and non-governmental agencies to work together since planning cannot be done in isolation. The Committee will continue to act as a resource for outside researchers and liaison with the Committee is encouraged.

Although the terms of reference remain unchanged, the Committee will focus on the following three functions:

- Advise government on health and social service personnel, training, and related issues;
- Collect relevant up-to-date workforce data for research purposes and publish information on this subject;
- Coordinate the planning and research activities of participating departments in the area of health and social service personnel and ensure necessary research is being undertaken either within government or by external groups.

The complete Terms of Reference are found in Appendix A on page 11.

C. Structure and Membership of the Committee

As of March 31, 1990, the following departments were represented on the Committee: Advanced Education; Career Development and Employment; Family and Social Services; Health; and the Professions and Occupations Bureau. The Committee reports through the Chairman to the lead Minister, the Hon. R. S. (Dick) Fowler, Q.C., Minister Responsible for Professions and Occupations. Mrs. Dianne Mirosh, Chairman of the Council on Professions and Occupations and MLA for Calgary Glenmore, assisted Mr. Fowler with his responsibilities. On March 31, 1990, the ministers of participating departments were: the Hon. John Gogo (Advanced Education), the Hon. Norm Weiss (Career Development and Employment), the Hon. John Oldring (Family and Social Services), and the Hon. Nancy Betkowski (Health). Mr. Elvin Christenson, F.C.A. served as Chairman.

The Committee is supported by an Executive Secretary and a Secretariat which consists of research staff from participating departments. In addition, research and support staff referred to as the Workforce Planning Unit assist the Committee in its work. The unit is responsible for two annual surveys and it maintains a database on all health and social service occupations. It also produces and distributes the Committee's annual workforce reports. The Workforce Planning Unit is administratively based in the Professions and Occupations Bureau and is under the supervision of the Executive Secretary.

A list of members of the Alberta Health and Social Services Disciplines Committee and its Secretariat for the 1989-90 year appears in Appendix B on page 12.

II. Health and Social Service Workforce Issues

The Alberta Health and Social Services Disciplines Committee is the central body which has the responsibility to ensure there is a trained and dedicated workforce to support the health and social service system. Change is occurring rapidly in many areas — the economy, technology, society and the environment. Our health and social service systems are responding to these changes and, in turn, the makeup of the health and social service workforce must be structured to reflect the needs of the system.

In the last few years there has been a great deal of emphasis on Canada's health care system. Many provinces established Commissions to examine the issues surrounding health care and to recommend changes for the future. The Committee was kept apprised of these studies since their recommendations have implications on workforce planning.

The Committee is cognizant of the many trends that affect the labour market – the economy, an aging population, and technological advances, to name a few. Economic conditions must be carefully monitored by the Committee since they affect monies available for training programs and the mix of disciplines used by employers. Demographic changes have created increased demand for services for the elderly, and training programs in gerontology have been established for workers in the field. Advancing technology, particularly in health care, has a direct impact on workforce needs. New specialties have emerged and programs have been created to upgrade personnel. These are some of the major factors which must be taken into consideration by the Committee or other groups who are undertaking special studies.

In the 1989-90 year, the Committee examined a number of issues relating to health and social service personnel. The following summary provides an insight into some of the activities pertaining to the health and social service workforce.

A. Incentives to Attract Health and Social Personnel to Non-Urban Areas

Although the supply of personnel may be adequate, distribution could create shortages in certain areas. Rural and northern localities are susceptible to such problems. Recruitment and retention may be enhanced through the use of incentives. The Disciplines Committee conducted a study to obtain information on what programs exist to recruit and retain personnel to non-urban areas, how they are utilized, expenditures, degree of satisfaction with existing programs, and suggestions for alternative programs. Questionnaires were mailed to health units, hospitals and long term care facilities throughout the province except the urban areas of Calgary, Edmonton, Lethbridge, Medicine Hat and Red Deer. Data was also obtained from the Northern Alberta Development Council and government departments which administered incentive programs. The final report will be circulated later this year.

B. Part-time and Casual Employment

The Committee's report "Part-time and Casual Employment in Selected Health and Social Service Groups in Alberta" was circulated in July 1989. This report contained the findings of a study undertaken the previous year to determine the extent of part-time and casual employment. Sixteen health and social service occupational groups were included in the study. The study examined employment levels in full-time, part-time, and casual categories over time. Of the groups selected, dental hygienists, registered nursing assistants, registered nurses, dietitians/nutritionists, physical therapists, emergency medical technicians and pharmacists had the highest percentage of part-time employment in 1987. In 1989, the percentage of part-time employment continued to increase for all these groups except dietitians/nutritionists, pharmacists, and psychologists which remained unchanged or showed slight decreases.

Where available, registration data from professional associations/licensing bodies was analyzed to determine the annual hours practised in the various employment categories. With these findings, the data analysis of the employer's survey was adjusted to reflect the level of participation of part-time employees in today's labour market. In addition, the lack of data on casual or temporary employment was identified as an important gap in workforce information. As a result, the Disciplines Committee's employer survey now requests employers to submit information on the number of employees and the hours worked for this category of personnel. Not all employers are able to provide this information, however, and professional associations are encouraged to obtain such employment data from their membership through the annual registration process. A complete picture of the labour pool cannot be accurately projected without information on casual or contract employment.

C. The Rainbow Report

In December 1987, the Premier established a Commission on Future Health Care for Albertans to conduct an inquiry into changes needed in the health care system to the next century. In December 1989, the Commission submitted its findings in "The Rainbow Report: Our Vision for Health," Volumes I, II, and III. After releasing the report, the Commissioners held a workshop for interest groups which served as a discussion forum on the principles and recommendations contained in the report. Several Committee members participated in this event.

The report contains recommendations specific to health care providers. It emphasizes the need for cooperation between members of the health care team in order to develop trust and respect for the vital and complementary contributions each group provides. It also recommends workforce planning be carried out at the local level involving employers and providers. The Disciplines Committee plans to submit comments to the Minister of Health on the recommendations which are within its mandate.

D. Nursing Personnel

Registered nurses make up the largest professional group of health care providers. In 1989, there were 13 basic education programs offered through hospitals, community colleges, and universities. Provincial nursing educators are working on the development of collaborative nursing education models. These models propose to integrate programs within a region through updated curricula and a choice of degree or diploma qualifications. A model for Red Deer which incorporates on-site

baccalaureate studies was approved as a pilot project commencing in 1990. Models for Edmonton, Calgary, and Lethbridge-Medicine Hat are at various stages of development. The Disciplines Committee was kept apprised of these proposed models since, in some cases, reduced quotas were being considered. The Disciplines Committee encourages changes which link programs and increase transferability of credentials. The Committee commends the nursing educators for their work in this regard.

Training for psychiatric nurses was also a subject for consideration during the past year. In Alberta, this group of specialist nurses have been trained at the two psychiatric hospitals. However, the program at Alberta Hospital, Edmonton will be discontinued and options are being examined to determine the most appropriate type of training to meet future mental health needs. Presently, both registered nurses, some with post-basic training, and psychiatric nurses are employed in this area of service.

E. Physicians

Although Alberta has an adequate supply of physicians for its population, the distribution of personnel has created shortages in rural areas. This problem was brought to the Committee's attention and a working group created to explore initiatives to address recruitment and retention problems has Committee representation. The Committee also maintained liaison with the External Advisory Committee on Physician Manpower which meets annually to discuss workforce issues and find solutions to problems which have arisen.

F. Dental Personnel

Legislation for dental personnel sets out the scope of practice for each group. Regulation of dental hygienists, assistants, and technicians is outdated and has serious limitations. Since legislation has workforce implications, the Committee was involved in developing legislative options for these groups. An umbrella statute, through which scopes of practice can be updated to reflect current practices, is expected to be tabled at the spring sitting of the Legislature.

The high vacancy rate for dental hygienists has been a concern for a number of years. Increasing the quota of the diploma program at the University of Alberta is one proposed solution. This option will be explored within the next few months.

G. Psychologists

A section of the Psychology Profession Act, if proclaimed, would require all new registrants to hold a doctoral degree to practice as a chartered psychologist. The necessity and appropriateness of this change has been questioned. To address this problem, the Health and Social Services Disciplines Committee established a Working Group consisting of representatives from the Psychologists Association, educational institutions, the service sector and government. The group will study and make recommendations on competencies and training required to practise clinical psychology. It is to submit its recommendations and report to the Committee in November 1990.

H.	**Pharmacists**	The supply of pharmacists, particularly in hospital settings, has been a concern in recent years. The Disciplines Committee has been monitoring the situation through its annual survey of employers. Data from the survey indicates that, although the number of pharmacists in the workforce has been increasing, the demand continues to exceed supply, particularly in some employment settings. In 1989, the number of pharmacists employed in all practice settings increased by five percent. However, a greater proportion of pharmacists are now employed by hospitals and nursing homes. There was a 23 percent increase in the number of pharmacists employed in this setting. The overall vacancy rate for all pharmacists has remained rather constant at around six percent. However, the rate for those employed in hospitals and nursing homes, although lower now than previously, remained significantly higher at around nine percent. The Committee will continue to monitor this situation.
I.	**Day Care Personnel**	In March 1990, the government released its white paper on reforms to Alberta's Day Care Program. Implementation of qualification requirements for day care centre staff was included in the proposed changes. To plan for this, the Disciplines Committee annual employer survey included day care operators in the 1988 survey. The results of that study were released in the report "Day Care Personnel in Alberta." Data on qualifications of currently employed centre directors and workers was collected for a second year in 1989. This information is being used to determine future training needs.
J.	**Legislation**	The Committee reviewed proposed changes to professional legislation and other regulations where they would impact on workforce needs. The Professional Statutes Amendment Act which is scheduled to be tabled at the spring sitting of the Legislature contains changes affecting the practice of nursing, physical therapy and occupational therapy. In addition, changes to the Nursing Homes Operation Regulation which affects the use of psychiatric nurses was considered. As noted earlier, the Committee was also involved in the development of the proposed bill to regulate dental disciplines, also scheduled for the spring sitting.

III. Planning Coordination and Liaison

The Alberta Health and Social Services Disciplines Committee acts as a forum for representatives to keep informed of activities in the various departments. During the year, each department gave a presentation on changes in policy, directions, and programs. This gave Committee members the opportunity to consider the impact of new directions on workforce planning. The Committee met six times during the 1989-90 period. Beginning in 1990, the Committee will meet on a regular quarterly basis with additional meetings scheduled as required. Over the year, the Secretariat met as needed to prepare for Committee meetings or to work on specific studies. These meetings provided a means for information exchange, setting priorities, and a cooperative approach to research and planning activities.

In addition to communication between departments, the Committee and its Secretariat maintained contact with representatives of professional associations, post-secondary educational institutions, organizations representing employers, or other committees and agencies which have an interest in workforce matters.

Workforce planning is also the mandate of the Federal/Provincial Advisory Committee on Health Human Resources. This is an intergovernmental body made up of representatives from the federal government, the provinces, the Yukon and the Northwest Territories. It meets biannually and reports to the Conference of Deputy Ministers of Health. This Committee monitors the supply and demand of major health occupations on a Canada-wide basis and undertakes special studies as required. Working committees may be established for special projects and liaison with other federal/provincial committees or national organizations is maintained. Through these channels, strategic planning in health human resources is carried out from a national perspective and a unified approach may be taken to resolve problems. The meetings alone serve as an excellent forum for representatives to keep abreast of developments in other provinces and to exchange ideas on common problems. Reports of each meeting were submitted to the Committee for review and discussion. The Health and Social Services Disciplines Committee has continued to benefit from its participation on the federal/provincial committee.

IV. Collection and Distribution of Workforce Data and Information

The mandate of the Alberta Health and Social Services Disciplines Committee includes the development and maintenance of databases on training programs and on the supply and distribution of personnel for health and social service disciplines. This responsibility receives priority with the Committee since comprehensive and reliable data must be available in order to carry out the Committee's research activities and to plan for future requirements. As a means of collecting information, several surveys are conducted on an annual basis by the Workforce Planning Unit and participating departments. Employers, self-employed professionals, post-secondary institutions, professional associations, and licensing bodies are among those surveyed. The Committee has always received excellent cooperation from these groups and is grateful for the assistance and support received.

The data and information obtained through the surveys are used to support research projects undertaken by the Committee or by other groups, and to respond to specific requests from interest groups. Survey participants are encouraged to use the data collected for their own studies. The Committee also uses information collected as the basis for its annual workforce publications which receive wide distribution.

The following section describes the specific surveys undertaken by the Committee on an annual basis and the publications produced.

A. Survey of Professional Associations and Licensing Bodies

The Disciplines Committee conducted its annual survey of professional associations and licensing bodies of health and social service personnel in December 1989. This survey was first initiated in 1978.

Information collected by professional associations and licensing bodies is valuable for workforce planning purposes. Although the survey of employers and self-employed professionals collects employment data, it has limitations and needs to be supplemented with other data. The registration data collected by professional bodies are very useful for this purpose. Associations are encouraged to compile information on gender, age, level of education, employment status, type of employer, area of practice, and annual hours practised. This will enable them to obtain a profile of their members and to monitor workforce supply.

To minimize risk to the public, it is necessary to regulate a number of disciplines through professional legislation. This is particularly common for the health professions. As part of that legislation, the professional associations are often granted self governing powers with responsibilities for registration of their members. Registration of individuals within a profession is compulsory if the legislation grants exclusive practice rights. In other cases, registration is mandatory if professionals wish to use the titles reserved to identify qualified practitioners. Data from these self governing bodies are very reliable and are particularly useful for special studies.

The survey of professional associations and licensing bodies consisted of mailed questionnaires. In 1989, questionnaires were sent to over 50 health and social service associations and licensing bodies. As in previous

years, the response was excellent; the Committee is grateful to all those who participated.

The information collected through these associations and licensing bodies is used to supplement data obtained from the survey of employers and self-employed professionals. It is published in the Committee's annual inventory of health and social service personnel.

B. Survey of Employers of Health and Social Service Personnel

The Committee conducts a survey of all health and social service employers and self-employed professionals on March 31 of each year. This yearly survey began in 1979. Although the questionnaires and list of participants are updated to reflect changes in services, occupations, and employers, the information which is solicited has been standardized as much as possible so that year-to-year comparisons may be made and trends may be monitored.

The survey consists of mailed questionnaires designed for specific employers. As in previous years, the survey collected information on permanent or regular personnel, casual or relief personnel, and occupations for which recruitment difficulties occurred. In the section pertaining to permanent personnel, the questionnaires requested information on the number of full-time and part-time employees and the number of vacancies and resignations. For casual, contract, relief or temporary personnel, data on the total number employed and the number of hours worked over the last year was requested. In the section pertaining to difficult to recruit occupations, employers were asked to respond to two questions. One question asked respondents to identify the occupations for which they anticipated recruitment difficulties and the reasons for such problems. Another question, designed to quantify recruitment difficulties, was added to the 1989 survey. It requested employers to identify positions which had been vacant for three months or longer while recruitment activities were in progress.

In 1989, over 5,300 employers who were grouped into approximately 30 categories were included in the survey. Of these, 98.8 percent responded. As in previous years, over 80 health and social service occupations were included in the questionnaires. For a number of occupations, such as registered nurses, social workers, child and youth care workers, and ambulance, day care, dental, and eye care personnel, the occupational category was refined further by level of training or area of specialization within the practice. This resulted in 134 different occupational categories.

The survey was carried out by Committee's Workforce Planning Unit with assistance from the Departments of Advanced Education and Health. The Committee is grateful to all respondents who cooperated to provide data for the survey.

The information gathered through the survey was published in a report which was distributed to all participants and government departments as well as non-government interest groups such as professional associations, educational institutions, and service agencies.

C. Survey of Health and Social Service Education Programs

Post-secondary institutions are surveyed on an annual basis to obtain information on the enrolment and graduate data for health and social service training programs. This survey, which originated in 1978, is conducted by the Program Coordination Branch of the Department of Advanced Education.

The 1989 survey collected information on over 40 different areas of study through programs ranging from post graduate degrees, undergraduate degrees, diplomas, certificate, refresher courses, and post basic certification. The institutions included were universities, technical institutes, community colleges, vocational training centres, and hospitals. Data on each program included the training institute, program length, intake and graduation date, quotas, applicants, enrolments by year, and the number of graduates.

Information from the survey was compiled with data from the previous years to obtain a five year inventory. This allows for year-to-year comparisons, calculation of attrition, and trends to be noted. The data is found in Advanced Education's yearly publication on health and social service education training programs and is incorporated in the Disciplines Committee's annual inventory of health and social service personnel.

Since an adequately trained workforce depends to a large extent on the output from available provincial training programs, this inventory is used extensively for planning purposes by both the Committee and outside groups. The potential supply of qualified personnel can be monitored and future projections can be made.

D. Publications

In addition to its Annual Report, the Alberta Health and Social Services Disciplines Committee produces a number of publications on a yearly basis to ensure information on health and social service personnel is available to as wide an audience as possible. These publications contain information such as the supply, demand, and distribution of personnel, labour force indicators, and the legislation and training programs which apply to occupations within its mandate. The reports are distributed to interest groups within and outside the province. Government departments, non-government agencies, educational institutions, professional associations, employers, and libraries are among those who receive the Committee's publications. By sharing information in this way, the Committee promotes awareness of the importance of workforce planning, avoids duplication of data collection, and encourages groups to undertake planning activities specific to their needs. The readership also assists the Committee by providing comments so that improvements may be made to data collection and information provided.

The following publications were circulated during the past year:

- "Health and Social Service Personnel Working in Alberta, March 31, 1989"
- "Alberta Health and Social Service Education Programs Inventory, December 1989"
- "Health and Social Service Manpower in Alberta, 1988"

E. Information Requests

A complete analysis of the data collected by the Committee cannot be included in the annual workforce publications. This applies particularly to data from the annual employer survey which may be analyzed by employer group, region, occupation, census division, etc. In order to maximize the use of this information, the Committee encourages interest groups to request data specific to their needs. The Workforce Planning Unit was responsible for responding to requests received. In 1989, such requests were submitted by government departments, non-governmental agencies, educational institutions, professional associations, and the public.

Appendix A
Terms of Reference of the Alberta Health and Social Services Disciplines Committee

1. In conjunction with appropriate agencies, develop on an ongoing basis inventories on:
   (i) Health and social services disciplines training programs;
   (ii) Health and social services disciplines supply and distribution.
2. Review pertinent studies, data and executive decisions from other jurisdictions on the training and supply of health and social services manpower.
3. Review short and long range plans from appropriate agencies for:
   (i) Health and social services disciplines training programs;
   (ii) Health and social services disciplines supply and distribution.
4. Review alternative requirements to meet the needs for the development of health and social services in the future.
5. Define areas of particular concern in the training and/or supply and/or distribution of health and social services personnel and recommend ways of resolving these concerns.
6. Advise from time to time on request the need for in-depth studies in particular areas of manpower training and supply.
7. Undertake such other related activities as may be required.
8. Submit an Annual Report on the activities of the Committee.

Appendix B
Membership of the Alberta Health and Social Services Disciplines Committee

Members of the Committee	Mr. Elvin A. Christenson, F.C.A., Chairman, Alberta Health and Social Services Disciplines Committee
	Mr. William E. Novasky, Director, Program Coordination Branch, Alberta Advanced Education
	Dr. Bev MacKeen, Director, Industry Analysis Branch, Alberta Career Development and Employment
	Ms. J. (Anne) Ward Neville, Executive Director, Family Support Services, Alberta Family and Social Services
	Mr. Don J. Junk, Assistant Deputy Minister, Policy and Planning Services Division, Alberta Health
	Mr. Dennis Gartner, Executive Director, Alberta Professions and Occupations Bureau
Members of the Secretariat	Mrs. Frances Rawson, Executive Secretary, Alberta Health and Social Services Disciplines Committee (Professions and Occupations Bureau)
	Ms. Laura Frigo, Research Officer, Program Coordination Branch, Alberta Advanced Education
	Mr. Ralph Westwood, Assistant Director, Program Coordination Branch, Alberta Advanced Education
	Ms. Eva Luczynska, Research Officer, Industry Analysis Branch, Alberta Career Development and Employment
	Ms. Valerie Richmond, Director, Planning Support, Alberta Family and Social Services
	Mrs. Brenda Johnson, Manager, Health Disciplines Planning, Research and Planning Branch, Alberta Health
	Mrs. Cecilie Lord, Director, Research and Planning Branch, Alberta Health
	Ms. Dawn Schumilas, Planning Analyst, Research and Planning Branch, Alberta Health
	Ms. Kathleen Morrow, Research Officer, Professions and Occupations Bureau